STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE TENNESSEE

TIMELY - CLAIMS PAYMENT - DEFINITION OF CLAIM

- The State of Tennessee defines a claim as (1) A bill for services, (2) A line item of I. service.
 - 1. The following types of services are reimbursed as a bill for services:
 - (a) Inpatient hospital
 - (b) Outpatient hospital
 - (c) Rural health clinic
 - (d) Other laboratory and x-ray
 - Skilled nursing facility services for individuals 21 years of age and older (e)
 - Early and periodic screening and diagnosis of individuals under 21 years (f) of age, and treatment of conditions found.
 - (g) (h) Family planning
 - **Physicians**
 - (i) Home health
 - (k) Dental
 - (1) Prescribed drugs
 - (m) Prothetic devices
 - (n) Eyeglasses
 - (o) Inpatient psychiatric facility services for individuals under 22 years of
 - (p) Extended services to pregnant women
 - Respiratory care (q)
 - (r) Transportation
 - (s) Care and services provided in Christian Science Sanitoria
 - Emergency hospital
 - 2. The following types of services are reimbursed as a line item of service:
 - (a) Pharmacy
 - (P) Intermediate care facility
 - Intermediate care facility services for the mentally retarded (c)

AT-87-29 Effective 7/1/87

TN NO. 87-29 DATE/RECEIPT DATE/APPROVED/ DATE/EFFECTIVE

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STATE TENNESSEE

TIMELY -	CLAIMS	PAYMENT	- DEFINITION	OF CLAIM
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- II. Claim Signature/Certification In submitting claims for reimbursement the claim signature/certification block must contain one of the following signature methods:
 - Handwritten signature
 - Typewritten signature
 - Rubber stamp signature
 - Computer printed signature

Note: Either full name or initials is acceptable.

Provider authorization for the signature on claims submitted to Medicaid is receipt and acceptance of payment with an itemized remittance advice for these claims; i.e., check endorsement.

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TN NO. 87-2 DATE/RECEIPT SOLEDSEDES CATE/ALPHOVED 10/13/87
TN NO. 19-9 DATE/EFFECTIVE 7/1/87